

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Grimbergen et al	Group Art Unit: 1763
Serial No: 09/610,237	Examiner: Jeffrie Robert Lund
Confirmation No: 5355	Attorney Docket No: 002813 USA D01/ETCH/SILICON/JB1
Filed: July 5, 2000	February 6, 2003 San Francisco, California
Title: CHAMBER HAVING PROCESS MONITORING WINDOW	

AMENDMENT IN RESPONSE TO FINAL OFFICE ACTION

Commissioner for Patents  
Washington, D.C. 20231

Via Facsimile Transmission  
(703) 872-9311

Examiner Lund:

This communication is being filed in response to the Office Action mailed on December 6, 2002, and is being timely filed within 2 months thereof.

I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office via Fax No. (703) 872-9311.	
By <u><i>Rocco Nienstadt</i></u>	Date <u>2/6/03</u>
Rocco Nienstadt	

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JANAH & ASSOCIATES, INC.  
650 Delancey Street, Suite 106  
San Francisco, California 94107 U.S.A.

ATTENTION: Jeffrie Robert Lund  
FIRM/CO. NAME: USPTO  
FAX NO.: (703) 872-9311  
FROM: Reece Nienstadt  
DATE: February 6, 2003  
OUR REFERENCE NO.: 2813 USA D01/ETCH/SILICON/JB1  
YOUR REFERENCE NO.: Application No. 09/610,237

Total number of pages 18 (including cover page)

If you do not receive all pages, please call: Steve

Business phone: (415)538-1555

Facsimile No.: (415)538-8380

MESSAGE:

Examiner Lund,

The amendment for the above-referenced application is attached.

Regards,

Reece

ATTORNEY-CLIENT PRIVILEGED COMMUNICATION

The information contained in this facsimile transmission is privileged and confidential. It is intended only to be read by the individual or entity named above or their designee. If the reader of this facsimile transmission is not the intended recipient, you are on notice that any distribution of this facsimile transmission, in any form, is strictly prohibited. If you have received this facsimile transmission in error, please immediately notify the sender and/or Janah & Associates, Inc. by telephone at (415) 538-1555 and delete or destroy any copy of this facsimile transmission.

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In re application of: Grimmergen et al  Application No: 09/610,237 Confirmation No: 5355  Filed: 7/5/2000  For: CHAMFRER HAVING PROCESS MONITORING WINDOW		Group No: 1763  Examiner: Jeffrie Robert Lund  Attorney Docket No: 2013 USA D01/ETCH/SILICON/JD1  February 6, 2003 San Francisco, CA 94107											
VIA FACSIMILE / 703-872-9311 Assistant Commissioner for Patents Washington, D.C. 20231		<b>Extension of Term</b> <input type="checkbox"/> Applicant petitions for an extension of time under 37 C.F.R. 1.136											
<b>Papers Enclosed</b>  <input checked="" type="checkbox"/> Amendment and Marked Up Copy of Claims/Specification <input type="checkbox"/> Drawings <input type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> PTO-1449 Form <input type="checkbox"/> Citations <input type="checkbox"/> Declaration/Affidavit <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Postcard for Return <input type="checkbox"/>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Extension (Months)</th> <th style="text-align: left;">Extension Fee</th> </tr> <tr> <td><input type="checkbox"/> One Month</td> <td>\$110</td> </tr> <tr> <td><input type="checkbox"/> Two Months</td> <td>\$400</td> </tr> <tr> <td><input type="checkbox"/> Three Months</td> <td>\$920</td> </tr> <tr> <td colspan="2" style="text-align: right;"><b>Total \$ 0.00</b></td> </tr> </table> <p><input checked="" type="checkbox"/> Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.</p>		Extension (Months)	Extension Fee	<input type="checkbox"/> One Month	\$110	<input type="checkbox"/> Two Months	\$400	<input type="checkbox"/> Three Months	\$920	<b>Total \$ 0.00</b>	
Extension (Months)	Extension Fee												
<input type="checkbox"/> One Month	\$110												
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<input type="checkbox"/> Three Months	\$920												
<b>Total \$ 0.00</b>													
<b>Fees for Extra Claims</b>													
Amendment Fee Calculation													
	Claims remaining after amendment	Highest Number Previously Paid for	Number Extra	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Rate</th> <th style="text-align: left;">Additional Fee</th> </tr> <tr> <td>Large Entity</td> <td></td> </tr> </table>	Rate	Additional Fee	Large Entity						
Rate	Additional Fee												
Large Entity													
Total Claims	71	88	0	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>\$18</td> <td>0</td> </tr> </table>	\$18	0							
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Independent Claims	11	13	0	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>\$84</td> <td>0</td> </tr> </table>	\$84	0							
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Multiple Dependent Claims				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>\$280</td> <td>0</td> </tr> </table>	\$280	0							
\$280	0												
Supplemental Information Disclosure Statement				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>\$180</td> <td></td> </tr> </table>	\$180								
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<b>Total</b>				0									
<b>Fee Payment</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Extension Fees</td> <td style="width: 50%;">\$0.00</td> </tr> <tr> <td>Fees for Extra Claims</td> <td></td> </tr> <tr> <td><b>Total</b></td> <td>\$0.00</td> </tr> </table>		Extension Fees	\$0.00	Fees for Extra Claims		<b>Total</b>	\$0.00	<b>Fee Deficiency</b> <p><input checked="" type="checkbox"/> If any additional extension and/or fee is required, please charge Deposit Account No. <u>10-0258</u> and/or</p> <p><input checked="" type="checkbox"/> If any additional fee for claims is required, please charge Deposit Account No. <u>10-0258</u></p>					
Extension Fees	\$0.00												
Fees for Extra Claims													
<b>Total</b>	\$0.00												
<input type="checkbox"/> Attached is check no. _____ in the sum of \$0.00. <input type="checkbox"/> Please charge deposit account no. <u>10-0258</u> in the sum of \$0.00		Please direct all telephone calls to: Ashok K. Janah at (415) 538-1555  Please continue to send correspondence to: Applied Materials, Inc. Patent Department, M/S 2061 P.O. Box 450A Santa Clara, CA 95052											
I hereby certify that this correspondence is facsimile transmitted to the U.S. Patent and Trademark Office via Fax No. (703) 872-9311.  By <u>Reece Nienstadt</u> Date <u>2/6/03</u>		Respectfully Submitted <u>Ashok K. Janah</u> Date <u>2/6/03</u> Registration No. 37,487											

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